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MS AS FILED — (Column 1) NUMBER FILED minus 20 minus 3	(Col NUMBE = 7 CFR 1.16(d)) ter "0" in column 3: - PART II (Column 2) HIGHEST NUMBER PREVIOUSLY, PAID FOR 2	(Column 3) PRESENT EXTRA	SMALL E RATE	FEE \$	OR OR OR OR OR OR	OTHEF SMALL RATE	FEE S
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			+ s =		OR	+5	
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mn 1)	(Column 2)	(Column 3)					
AIMS AINING TER DMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Minus	***	=	x \$ =		OR	x \$ =	
		!			1		
AFTER AMENDMENT PREVIOUSLY PAID FOR Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			TOTAL		ĺ	TOTAL	<u> </u>
			ADD'L FEE] OR	AUDEFEE	<u> </u>
mn 1)	(Column 2)	(Column 3)			1		1
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Minus	**	=	x \$=		OR	x s=	
Minus	***	=			OR	x s=	
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AFTER AMENDMENT PREVIOUSLY PAID FOR					J OK	TOTAL	
			ADD'L FEE		OR	ADD'L FEE	L
	mn 1) AIMS AINING TER DMENT Minus F MULTIPLE DEPENDE	mn 1) (Column 2) AIMS HIGHEST NUMBER PREVIOUSLY PAID FOR Minus " F MULTIPLE DEPENDENT CLAIM (37 CF) Is less than the entry in column 2, write the column 2. Write the column 2 write the column 2. Write the column 2. Write the column 2. Write the column 2. Write the column 3. Write t	TITLE DEPENDENT CLAIM (37 CFR 1.16(d)) TIME 1) (Column 2) (Column 3) AIMS HIGHEST NUMBER PREVIOUSLY PAID FOR Minus " = F MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) Is less than the entry in column 2, write "0" in column 3.	TOTAL ADD'L FEE TOTAL ADD'L FEE	TOTAL ADD'L FEE TOTAL ADD'L FEE	X S	X S

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, uspection gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.